



सत्यमेव जयते

District Health Plan 2007 — 08

Gram Panchayat Level Training Module



राष्ट्रीय ग्रामीण स्वास्थ्य मिशन

West Bengal

Department of Health & Family Welfare
Government of West Bengal

10355

10855

Community Health Cell

Library and Information Centre

359, "Srinivasa Nilaya"

Jakkasandra 1st Main,

1st Block, Koramangala,

BANGALORE - 560 034.

Ph : 2553 15 18 / 2552 5372

e-mail : chc@sochara.org

MODULE FOR ORIENTATION OF GRAM PANCHAYAT LEVEL FACILITATOR'S TEAM

INTRODUCTION

The Mission of the Department of Health and Family Welfare, Government of West Bengal is to improve the health status of the poor and the marginalized. The National Rural Health mission launched by Government of India for the period 2005-2012 is to operate as an umbrella program by integrating all the vertical health programs.

District Health Action Plans are planned so as to evolve through a participatory and consultative process with involvement of a wide range of stakeholders — Panchayati Raj Institutions, representatives from relevant Departments like Women & Child Development (ICDS), Water & Sanitation and NGOs. The planning would occur at 3 levels — Gram Panchayat, Block and District. The District planning would use a bottom up approach with planning of health actions at village level being guided by the Gram Panchayat action plan as the first level of integration.

To facilitate the entire process, teams are formed at the District, Block and Gram Panchayat level. They will be given proper orientation to enhance capability in taking up responsibility of developing a realistic Health Action Plan at their respective levels as well as orienting the planning team members & supporting the planning process at the next level. Templates and guidelines have been designed to provide a flexible framework to assist the health action planning processes at 3 levels.

This module is developed for training the planning team members at the Gram Panchayat level so that they can help facilitate planning at Gram Panchayat level as well as guide the Sub centre level planning.

SCHEDULE FOR THE TRAINING OF GRAM PANCHAYAT LEVEL FACILITATOR'S TEAM

Date & Time	Activity
Day 1	
10.30 – 10.45 a.m.	Registration
10.45 – 11.15 a.m.	Welcome, Introduction & Objective
11.15 – 12.15 p.m.	Background & Importance of Health Planning Process
12.15 – 12.30 p.m.	Introducing the Planning process: the template & guidelines
12.30 – 1.30 p.m.	Steps in Planning Process: - Situational analysis: Group discussion & exercise
1.30 – 2.30 p.m.	Lunch
2.30 – 4.00 p.m.	Situational analysis: Group discussion & exercise (contd.)
4.00 – 4.45 p.m.	Steps in Planning process:- Prioritization of key problems/health issues
4.45 – 5.00 p.m.	Feedback & Conclusion
Day 2	
10.00 – 10.30 a.m.	Recapitulation
10.30 – 1.30 p.m.	Steps in Planning process: - Preparation of Activity Plan (Group exercise)
1.30 – 2.30 p.m.	Lunch
2.30 – 3.30 p.m.	Steps in Planning Process: Development of Monitoring Plan (Group work)
3.30 – 3.45 p.m.	Tea Break
3.45 – 4.30 p.m.	Role of the Gram Panchayat Facilitator Team
4.30 – 4.45 p.m.	Feedback & Conclusion

TRAINING MODULE FOR THE GRAM PANCHAYAT LEVEL FACILITATORS TEAM

Welcome & Introduction

It should be ensured that the participants feel comfortable before starting the sessions. The participants will get to know each other as well as the facilitators. A conducive environment needs to be created so that the participants are allowed to express their opinion freely. Participants are asked to form pairs and introduce each other to the bigger group. This exercise should be viewed as an opportunity for team building amongst participants.

Government of India has launched the National Rural Health Mission (NRHM) for the period 2005-2012 which is to operate as an umbrella program by integrating all the vertical Health programs. In tune with the NRHM the DoHFW has decided to develop District level plans. The latter would be prepared in a consultative & bottom up process starting from Gram Panchayat level planning going up through block to district levels. Planning teams have been formed at the District, Block and Gram Panchayat level to take forward the process. Moreover to facilitate the Planning process a series of templates and guides have been developed at the three levels – Gram Panchayat, Block and District.

Objective of the training

The objective of the training is to create a pool of facilitators at the Gram Panchayat level well versed with the templates which would help the health planning team at the Gram panchayat level with the actual planning process. Moreover this team would guide and supervise the sub center level planning process.

Module 1— Background of Health Planning at Gram Panchayat, Block & District Level

Learning Objective	Contents	Learning Activity	Teaching Aids
Participants will be able to <ul style="list-style-type: none"> • explain the purpose of health Planning • understand the background of Health Planning • explain the needs of Health Planning at the District level • identify the steps in the Planning process • identify the relevant templates and justify their use during the Planning process 	Bottom up and Participatory approach — Health Action Plan from GP to block to to the State Objective of Grampanchayat level planning Introduction to the Planning Process and overview of templates & facilitation guide	Presentation by facilitator and discussion	Transparencies, flip charts & markers

Note for the Facilitators: The training facilitators have to discuss the following issues regarding the context, purpose and importance of District planning including Gram Panchayat level planning to the participants using presentation as well through interactive sessions.

Context

The mission of Department of Health & Family Welfare and Government of West Bengal is to improve the Health status of all particularly that of the poor & the marginalized. The Government of West Bengal (GoWB) has formulated the **Health Sector Strategy (HSS) 2004-13** to address priority health goals, especially for the poor and the disadvantaged.

The objective of the Health Sector Strategy (HSS)

- Improve accessibility of all health services (curative, preventive, promotive & rehabilitative)
- Reduce maternal & child mortality and burden of communicable, non-communicable and nutrition related diseases and disorders
- Ensure quality of all Health Services

A medium-term reform and investment programme has been launched by the Health and Family Welfare Department on August 16, 2005 named **Health Systems Development Initiative** (HSDI), which will operationalize the Health Sector Strategy. A Strategic Planning and Sector Reform Cell (SPSRC) have been constituted to spearhead this programme.

The **National Rural Health Mission**, recently launched by the Govt. of India for the period 2005-12 to enhance the scope of comprehensive primary health care services especially for the poor and vulnerable sections of the communities is to operate as an umbrella program through integration all vertical health programs including RCH II, National Anti Malaria Programme, National Leprosy Eradication programme, Revised National Tuberculosis control Programme and others.

Many of the public health outcomes are linked with several other sectors' performances namely Women and Child Development, Water and Sanitation. Hence undertaking coordinated efforts and ensuring convergence at the delivery level will be the prime mover towards the success of achieving public health targets. The 73rd and the 74th Amendments in the constitution have placed a crucial role for the PRIs in the sphere of public health. At this juncture it has been realized that for the successful implementation of the public health programmes the involvement of the PRIs is absolutely necessary.

Bottom up and Participatory approach — Health Action Plan from GP to block to district and ultimately to the State

Keeping this backdrop in mind the Department of Health & Family Welfare has decided to District level Health Action Plans are planned so as to evolve through a participatory and consultative process with involvement of a wide range of stakeholders like Panchayati Raj Institutions, representatives from relevant Departments-like Women & Child Development (ICDS), Water & Sanitation and NGOs to ascertain their specific health needs, problems in accessing health services and possible solutions as relevant to local population, especially poor women and children. The composition of the planning team is an admixture of personnel from various departments like Health, PRIs, Women & Child Development and Social Welfare (ICDS), Administration, Public Health Engineering, NGOs etc.

The Government of West Bengal places due emphasis on decentralized and community level planning which is in tune with the current NRHM priorities. Keeping this in mind the planning would occur at 3 levels — Gram Panchayat, Block and District. Following consultations at each level a plan will be developed which shall feed into the next level of plan i.e. a Gram Panchayat Plan will feed into the respective Block Health Plan which will coalesce into the District Plan. On the basis of the district plans, the State plan would be finally formulated.

Objective of the Gram Panchayat level planning

Gram Panchayat Health Planning is to ensure that a comprehensive & realistic Gram Panchayat Health Plan in a participatory manner which addresses the local health priorities.

Introduction to the Planning Process : overview of templates & facilitation guide

The templates have been designed to provide the framework of the planning process and the facilitation guide would help in understanding how to go about with the templates.

The **Gram Panchayat level Planning Templates** would include information on :

1. Geographic, demographic and socio-economic profile, over all Gram Panchayat health scenario, health infrastructure, IEC (BCC) Activities, drinking water, sanitation, birth & death registration issues and any other area specific activity.
2. Annual work plan based on key issues which came up during the situational analysis
3. Monitoring Plan

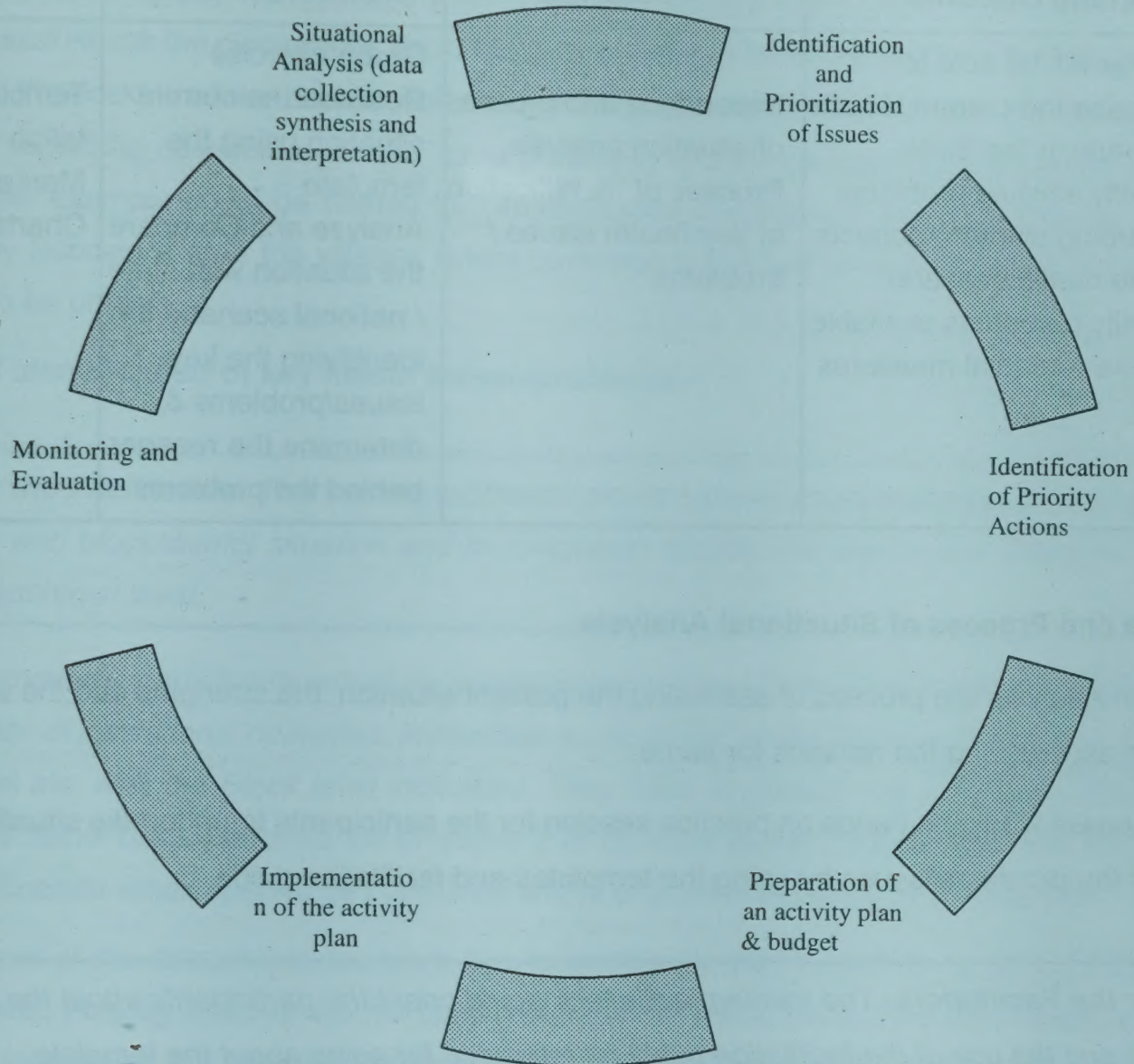
The templates are designed to capture quantitative data in the **Tables** and qualitative data in the form of **narrative**. On the basis of discussion of such quantitative and qualitative data the **Priority Actions** are identified.

Along with the templates a facilitation guide has also been created. The objective of the facilitation guide is mainly to assist in using the templates and to initiate discussion amongst the planning team members on the key issues. The facilitation guide will be the most important tool for the facilitator to guide the planning process.

Planning as a continuous process

This planning process is not a one time affair but a continuous process. Every year the same steps would be repeated to draw up the activity plan and the budget.

Planning Cycle



Planning is a continuous process. The major steps of planning are :

1. **Situational Analysis** — a process of assessing the present situation, the strengths and the weaknesses or gaps and ascertaining the reasons for same. It includes data collection, synthesis and interpretation.
2. **Identification & Prioritization of issues** – it is important that from the situation analysis the planning members are able to identifying problems/issues particular to the district that need to be addressed. Out of such issues identified prioritization has to be done in the order of it's importance.
3. **Identifying Priority Actions** – broad actions for achieving desired outcomes
4. **Activity Plan and budget** – focusing on the priority actions
5. **Implementation** of the activity plan
6. **Monitoring and evaluation** – a process of measuring, recording collecting and analyzing the data on actual implementation of the programme.

Module 2 – Steps in planning process: Situational Analysis

Learning Objective	Contents	Learning Activity	Teaching Aids
Participants will be able to: <ul style="list-style-type: none"> describe the current Health scenario in the Block identify existing problems regarding different aspects of the health scenario identify resources available to take remedial measures 	Importance and process of situation analysis Process of Identification of key health issues / problems	Group exercise : Describe the current situation using the template Analyze and Compare the situation with state / national scenario for identifying the key issues/problems & determine the reasons behind the problems	Templates, Facilitation Guide, Markers & Flip Charts

Importance and Process of Situational Analysis

Situation Analysis is a process of assessing the present situation, the strengths and the weaknesses or gaps and ascertaining the reasons for same.

This exercise would be hands on practice session for the participants to undertake situation analysis and identify the problems/issues by using the templates and facilitation guide.

Note for the Facilitators: The training facilitators would orient the participants about the template structure and the use of the facilitation guide as reference for going about the template.

The participants would be explained that the templates are so designed that the planning team members have to fill in quantitative data in the tables provided as well as write down qualitative information regarding the current situation relating to each of the sections (e.g. *Geographic, Demographic and Socio Economic Profile, Health Infrastructure including its functioning, Human Resource, Status of Services*). At the Gram Panchayat level there is more stress on qualitative aspects. The Gram Panchayat level Health Action Plan would evolve as a collation of Subcentre Action Plans primarily so that both the quantitative and qualitative information from Subcentres get captured at Gram Panchayat level. At the sub center level the planning would involve situational analysis through **health situation mapping** by the service providers and the Panchayat members apart from data tabulation in a few specified tables. The Subcentre level maps and data tables along with information from Panchayat records would form the main source of information at the Gram Panchayat level.

It has to be stressed that mere description of the situation is not the purpose of the exercise. They need to probe and analyze the situation and understand what are their achievements and what are their areas of weakness / gaps, interventions which have worked and which have not worked. For example under Neonatal Health the discussions could focus on number of neonatal deaths in the previous year and determining the pockets where deaths took place and trying to find out the reasons for same, community awareness regarding essential newborn care practices, referral transport arrangements for sick newborn. Another example could be related to immunization coverage. If low immunization coverage is noted in any Subcentre area the villages where coverage is low has to be determined and reasons for same has to be probed

Process of Identification of key health issues/problems

Note for the Facilitators: *The training facilitators would have to assist participants to compare the situation with block/district situation and in conclusion identify the key issues/ problems faced at Gram Panchayat level.*

For example the participants would be guided to make comparative analysis of the health indicators like proportion of institutional deliveries, immunization coverage, antenatal care coverage, communicable disease load etc. with the Block level indicators. They have to position the GP's over all performance whether it is below block performance or above it or at same levels. At the same time the situation in different Subcentre areas need to be compared and poor performing Subcentre identified.

At the end of the discussions the team has to identify the priority actions to address the identified gaps/problems. **Priority actions** are the broad action areas which have to be determined for achieving the desired outcome. For example improving Maternal Health outcomes one priority action could be improving the status of ante natal care coverage.

For this purpose the participants will be divided into smaller groups (4 – 5 groups) for the session and guided to work on one or two sections in details using the template and facilitation guide so that they describe/review the current situation, analyze it, identify the key problems and determine priority actions for same.

For each section it is important to refer to facilitation guide for filling up the qualitative and the quantitative information.

Module — 3 Steps in Planning Process: Development of Annual Action Plan

Learning Objective	Contents	Learning Activity	Teaching Aids
Participants will able to: <ul style="list-style-type: none"> • enlist the problems identified, according to priority / importance • identify realistic activities to address those problems • develop a need based Action Plan at Block level 	Process of formulating the objective and prioritization of the key issues/problems Process of formulating a realistic gram Panchayat Health Action Plan	Activity 1 Group Work: Prioritization exercise for key issues Activity 2 Group work: Action Planning exercise using the formats	Charts, Marker & pen, Templates & Facilitation guide

Note for the Facilitators: The training facilitators need to help participants learn how to prioritize the key issues, and then identify necessary activity for each one using the annual action plan format given in the templates. The facilitators should also help the participants to understand & use the Facilitation Guide.

Process of formulating the objective and prioritization of the key issues/problems

Before developing the Activity plan it is essential to formulate the objective. The latter are to be guided by the objectives laid down by the State. Before developing the Activity plan it is essential to formulate the objective. The latter are to be guided by the broad objectives as laid down by the State. It should also be kept in mind that each program running under the Health Department has its own specific objective. Thus the objective for the planning should be in tune with the State objective as well as the specific Program Objectives. As per the local requirement the prioritization may change as well as new objectives can be added. *While planning for the additional objectives, care should be taken to make the participants understand that it advisable to plan for such District specific need, but in the final State level plan it may not find a position and hence no resources are available for realization of such additional objective.*

Prioritization of key issues/problems

It is important for the facilitators compare the major findings from the situation analysis with the block / district figures. This would help the planning team in identifying/highlighting the problems or issues from the situation analysis undertaken(as stated earlier).

The facilitators should next help the participants in prioritizing key problems/issues. Prioritizing should be done taking into consideration the following criteria :

1. local needs
2. whether there are feasible solutions to the problems

3. whether problems can be handled at local level or interventions are needed at higher level
4. categorizing problems according to immediate solutions, mid term solutions and long term solutions

The participants can be divided into sub groups (4-5 such groups) and asked to prioritize the different problems identified in earlier session and present to the wider group along with explanation regarding the prioritization. The facilitators can then help draw a summary from all group presentations.

For example some of the priority issues at the Gram Panchayat level could be

- High number of neonatal deaths in last one year
- High proportion of home deliveries
- Inadequate space & lack of privacy for examining pregnant women at Subcentres
- Low immunization coverage
- High prevalence of diarrhea among young children
- High number of drug defaulters for tuberculosis

Process of formulating a realistic Gram Panchayat Health Action Plan & budget

Subsequently the participants should be guided to work in their smaller groups to develop the action plan. They can take up a few key issues and for each issue decide the priority action required and then the activities to be undertaken. Priority actions for each issue is decided during the situational analysis discussion.

For example improving immunization coverage in the area one priority action could be increasing outreach session coverage. There could be various activities/sub activities for improving outreach session coverage like Identifying the pockets of low immunization coverage, arranging for outreach camps at such sites in coordination with ICDS functionaries and PRIs, ensuring availability of manpower and vaccines for outreach session, create awareness generation for promoting immunization etc.

(Refer to the Templates and the facilitation guide for further details.)

Module 4 — Steps in Planning Process: Developing of Monitoring plan

Learning Objective	Contents	Learning Activity	Teaching Aids
<p>The Participants will be able to</p> <ul style="list-style-type: none"> - Identify areas / activities to be monitored - Review present system of monitoring - Understand the need for monitoring jointly - Formulate a joint plan of action for monitoring 	<p>Importance & need of Monitoring</p> <p>Need for joint monitoring</p> <p>Identification of areas/ activities/indicators to be monitored</p>	<p>Group exercise – developing joint plan of action for monitoring at District level & presentation</p> <p>3 groups will be created and they will work on</p> <p>1st group-Current scenario</p> <p>2nd group – action Plan for monitoring</p> <p>3rd group – Role of the specific committees in monitoring</p>	<p>Chart papers and markers, Templates & Facilitation Guide,</p>

Note for the Facilitators: The training facilitators need to explain the importance of monitoring especially the need for joint monitoring and help them develop a monitoring plan.

Importance & need of Monitoring

Importance of monitoring – Monitoring is an ongoing process aimed to bring about improvements in the programme. It helps determine the programme efficiency, helps in identifying the strengths and weaknesses of a programme and forms a basis for programme accountability. It helps us to detect any deviation from planned activities, ascertain the reasons for deviation and undertake suitable corrective actions. Monitoring runs along with implementation

Current Monitoring Procedure- It is necessary to review the current monitoring system including the process, the tools used, the persons involved and their roles.

Need for Joint Monitoring

Monitoring should be a responsibility of all the stake holders – PRI, Health ICDS and administration. A joint monitoring by all the stakeholders can prove to be more effective. This help to strengthen the ownership of the stakeholders and convergence of the different governmental sectors and the PRI.

Identification of areas/activities/indicators to be monitored

The monitoring plan should first decide the key areas that need to be monitored. It should take into account at what *periodicity* such monitoring should take place –Monthly/Quarterly/Six monthly/Annual combination of the above. Regarding the processes the planning team has to decide *how the monitoring is to be conducted* - use of reports/ visits/ checklists or verbal autopsies

Note for the Facilitators: *The facilitators should give idea regarding some basic indicators for monitoring purpose at the Gram Panchayat level. This would help to understand the progress, help identify the areas of underachievement as well as help to find out the reasons and subsequently plan measures necessary for improvement.*

In order to conduct actual and effective monitoring it is advisable that the Planning team members prepare a checklist for monitoring

While developing the monitoring plan the roles and responsibilities of different persons should also be decided. It is also vital to discuss about the envisaged roles of different Committees at different levels like *Sub center level committee, Rogi Kalyan Samitis at the PHC.*

Module 5 — Role of Gram Panchayat (GP) level Facilitator's team

Learning Objective	Contents	Learning Activity	Teaching Aids
The Participants will be able to develop role clarity as members of Gram Panchayat Facilitator's Team	<p>Importance of facilitation</p> <p>Role of participants as members of Block level Facilitator's Team</p> <p>Overview regarding supportive supervision for Subcentre level planning (mapping exercises)</p>	<p>Interactive discussion</p> <p>Group work :Action Plan to guide and supervise the Subcentre planning</p>	<p>Facilitation Guide</p> <p>Chart papers and markers</p>

Note for the Facilitators: The Training facilitators should elaborate on the importance of facilitation and the role expected from Block level facilitators

Importance of Facilitation

Facilitation is fundamentally a “helping” function. Facilitation helps group members make better decisions by pooling their ideas and generates a sense of ownership among the participating members. Facilitation is focused on process management - ‘how’ the content of a discussion is progressing as well as ‘how’ the group is interrelating.

Role of participants as members of GP level Facilitator's Team

- Conduct & facilitate Planning at GP level
- Facilitate Sub center level planning through social mapping exercise

Guiding Principles for Gram Panchayat level Facilitator's team

- The facilitators have to introduce the planning process and guide the group discussion
- In order to come up with the real health needs facilitators have to initiate discussion among the stakeholders to review and analyze current situation, identify gaps and problems and plan actions accordingly
- They should help group discussions to focus more on understanding reasons why people use/don't use health services and other health behaviours important for planning.

- *The Facilitators have to see that this planning process is not merely collation of data. They should help in collating the information from the Subcentre level mapping exercises*
- The facilitators have to ensure maximum participation from all, help participants recognize and appreciate differences and build consensus Facilitators should help the planning team in prioritizing the problems/issues and decide the priority action areas before developing the annual action plan. The facilitators should stress that problems that cannot be addressed immediately or does not have feasible or realistic solutions should be avoided
- The facilitators should ensure that the plan is realistic based on local needs and priorities.
- All the notes are to be collected by the Facilitators and proper documentation of the Health Action Plan would be undertaken by them

The GP level Team will also be sensitized about their role in guiding and supervising the Subcentre level planning exercise. Subcentre level plans would be developed on the basis of information collected and situation analysis made through health mapping and identification of major issues and problems during the mapping process. On the basis of such discussions priority actions at Subcentre will be determined. The focus of the mapping would be related to general geographic features, available health & ICDS infrastructure, available human resources and status of health services provided. The participants in such Subcentre mapping would be the ANM, the AWW, Link Person, trained Dai, the local Panchayat member and local NGO (if any)

Printed at
Saraswaty Press Limited
(Government of West Bengal Enterprise)
Kolkata 700 056